

00N038-US (06270004AA)

PATENT APPLICATION

SPW
✓ 2611

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of

Hiroshi Ishii

Conf. No.: 6346

Serial No.: 09/756,911

Group Art Unit: 2611

Filed: January 10, 2001

Examiner: B. Shelton

For: PROGRAM SELECTION DEVICE AND PROGRAM SELECTION
METHOD

Commissioner for Patents
United States Patent and Trademark Office
P. O. Box 1450
Alexandria, Virginia 22313-1450

AMENDMENT UNDER 37 C. F. R. §1.111

Sir:



In response to the Office Action mailed August 4,
2004, please amend the above-identified application as
follows:

Amendments to the specification begin on page
2 of this paper.

Amendments to the claims begin on page 3 of
this paper.

Amendment of the drawings begins on page 9 of
this paper.

Remarks begin on page 10 of this paper.

AMENDMENT TRANSMITTAL LETTER (Large Entity)				Docket No. 06270004AA	
Applicant(s): Ishii					
Application No. 09/756,911	Filing Date 01/10/2001	Examiner B. Shelton	Customer No. 30743	Group Art Unit 2611	Confirmation No. 6346
Invention: PROGRAM SELECTION DEVICE AND PROGRAM SELECTION METHOD					
 COMMISSIONER FOR PATENTS:					
Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.					
CLAIMS AS AMENDED					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	10 -	20 =	0 x	\$18.00	\$0.00
INDEP. CLAIMS	5 -	4 =	1 x	\$88.00	\$88.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$88.00
<input type="checkbox"/> No additional fee is required for amendment. <input checked="" type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input checked="" type="checkbox"/> A check in the amount of \$88.00 to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account 50-2041 <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. <input type="checkbox"/> Payment by credit card. Form PTO-2038.					
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.					
 _____ Signature			Dated: October 13, 2004		
Marshall M. Curtis Reg. No. 33,138 Whitham, Curtis & Christofferson, P.C. 11491 Sunset Hills Road, Suite 340 Reston, VA 20190 (703) 787-9400			I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on _____ (Date) _____ Signature of Person Mailing Correspondence _____ Typed or Printed Name of Person Mailing Correspondence		
CC:					